



Contract Reference Cover Sheet

<i>Responsible Department:</i>	<i>Financial and Administrative Services Department</i>
<i>Contact person in your office:</i>	<i>Wilbur Jones, Buyer I</i>
<i>Address:</i>	<i>Purchasing Office, 124 West 8th Street, Austin, 78701</i>
<i>E-mail:</i>	<u><i>wilbur.jones@ci.austin.tx.us</i></u>
<i>Telephone:</i>	<i>512-972-4013</i>
<i>Project Name & Description:</i>	<i>Ryan White, Part C HIV Services</i>
<i>Contractor/Vendor/Party:</i>	<i>AIDS Services of Austin</i>
<i>Contract Period:</i>	<i>01/01/07-09/30/07</i>
<i>Extension Options:</i>	<i>One 3-month and four 12-month options</i>
<i>Reference No.:</i>	<i>NG070000024</i>
<i>Requisition No.:</i>	<i>RQM 9100 07050400757</i>
<i>Solicitation No.:</i>	<i>Social Services</i>
<i>RX No.:</i>	<i>RQM 9100 07050400757</i>
<i>Agenda Item Number:</i>	<i>Item 3</i>
<i>Date Approved by Council:</i>	<i>03/01/07</i>

NOTE: Forward this document electronically to contracts@ci.austin.tx.us.

It will be attached to the approved ordinance or resolution and given to customers seeking information about the contract.